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BIBDATASHEET**CONFIRMATION NO. 2283**

Bib Data Sheet

SERIAL NUMBER 09/193,646	FILING DATE 11/17/1998 RULE	CLASS 705	GROUP ART UNIT 3621	ATTORNEY DOCKET NO. D1077+8
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APPLICANTS

JAY PAUL DRUMMOND, MASSILLON, OH;

DALE BLACKSON, CANTON, OH;

BOB A. CICHON, CANTON, OH; JOSEPH C. ESS, NORTH CANTON, OH;

MARK S. COVERT, CANTON, CA;

MARK A. MOALES, NORTH CANTON, OH;

DAVID W. WEIS, ASHLAND, OH;

MARK D. SMITH, NORTH CANTON, OH;

BRUCE G. RICHARDS, NORTH CANTON, OH;

JAMES CHURCH, KENT, OH;

**** CONTINUING DATA *******

This application is a CIP of PCT/US97/21422 11/25/1997

and claims benefit of 60/091,887 07/07/1998

and claims benefit of 60/095,626 08/07/1998

and claims benefit of 60/098,907 09/02/1998

and claims benefit of 60/031,956 11/27/1996

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 12/08/1998**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY OH	SHEETS DRAWING 31	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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09/193,646	11/17/98	705	2764	D1077+8

APPLICANT	JAY PAUL DRUMMOND, MASSILLON, OH; DALE BLACKSON, CANTON, OH; BOB A. CICHON, CANTON, OH; JOSEPH C. ESS, NORTH CANTON, OH; MARK S. COVERT, CANTON, CA; MARK A. MOALES, NORTH CANTON, OH; DAVID W. WEIS, ASHLAND, OH; MARK D. SMITH, NORTH CANTON, OH; BRUCE G. RICHARDS, NORTH CANTON, OH; JAMES CHURCH, KENT, OH.
	CONTINUING DOMESTIC DATA*** VERIFIED THIS APPLN IS A CIP OF PCT/US97/21422 11/25/97 PROVISIONAL APPLICATION NO. 60/091,887 07/07/98 PROVISIONAL APPLICATION NO. 60/095,626 08/07/98 PROVISIONAL APPLICATION NO. 60/098,907 09/02/98 PROVISIONAL APPLICATION NO. 60/031,956 11/27/96
	371 (NAT'L STAGE) DATA*** VERIFIED
	FOREIGN APPLICATIONS*** VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/08/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OH	SHEETS DRAWING 31	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Initials _____ Initials _____					

ADDRESS	RALPH E JOCKE WALKER & JOCKE 231 SOUTH BROADWAY MEDINA OH 44256

TITLE	AUTOMATED BANKING MACHINE APPARATUS AND SYSTEM

FILING FEE RECEIVED \$890	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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****CONTINUING DOMESTIC DATA*******

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AND A CIP OF PCT/US97/21422 11/25/97
PROVISIONAL APPLICATION NO. 60/031,956 11/27/96

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VERIFIED

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